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Substitute for Form 1449/PTO COMPLETE IF KNOWN **Application Number** Filing Date INFORMATION DISCLOSURE First Named Inventor Srinvasso STATEMENT BY APPLICANT(S) Art Unit 3772 (Use as many sheets as necessary) **Examiner Name** Kim Lewis Sheet 2 of Attorney Docket No. BVKZ20009US **U.S. PATENT DOCUMENTS** Name of Patentee or **Publication Date** Examiner Cite Document No. Number-Kind Code (il known) Applicant of Cited Document MM-DD-YYYY Initials* No. BA US-BB US-BC US-BD US-BE US-BF US-BG US-US-BH ВΙ US-US-BJ US-BK BL US-**FOREIGN PATENT DOCUMENTS** Name of Patentee or Publication Date Foreign Patent Document Examiner Cite **Applicant of Cited Document** Initials* No. MM-DD-YYYY Country Code-Number Kind Code (if known)) ВМ BN BO BP **OTHER - NON PATENT LITERATURE DOCUMENTS** Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc), date, page(s), volume-issue number(s), publisher, city and/or country where published Examiner Cite Initials* No. International Search Report corresponding to International Application No. PCT/US02/39680 BQ BR BS BU BV

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Examiner Signature	Date Considered	11/16/07